

SERFF Tracking Number: *PHYS-128214198* State: *Arkansas*
 Filing Company: *Physicians Mutual Insurance Company* State Tracking Number:
 Company Tracking Number:
 TOI: *MS05I Individual Medicare Supplement - Standard Plans* Sub-TOI: *MS05I.015 Multi-Plan*
 Product Name: *2012 Standard Mutual Medicare Supplement Rate Increase Filing*
 Project Name/Number: */*

Filing at a Glance

Company: Physicians Mutual Insurance Company

Product Name: 2012 Standard Mutual Medicare SERFF Tr Num: PHYS-128214198 State: Arkansas

Supplement Rate Increase Filing

TOI: MS05I Individual Medicare Supplement - Standard Plans SERFF Status: Closed-Approved-Closed State Tr Num:

Sub-TOI: MS05I.015 Multi-Plan

Co Tr Num:

State Status: Approved-Closed

Filing Type: Rate

Reviewer(s): Stephanie Fowler

Authors: Richie Hinman, Debbie Thielen

Disposition Date: 04/24/2012

Date Submitted: 03/30/2012

Disposition Status: Approved-Closed

Implementation Date Requested: 06/01/2012

Implementation Date: 06/01/2012

State Filing Description:

General Information

Project Name:

Status of Filing in Domicile: Authorized

Project Number:

Date Approved in Domicile: 12/05/2011

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Individual

Submission Type: New Submission

Individual Market Type:

Overall Rate Impact: 4.9%

Filing Status Changed: 04/24/2012

State Status Changed: 04/24/2012

Deemer Date:

Created By: Debbie Thielen

Submitted By: Debbie Thielen

Corresponding Filing Tracking Number:

Filing Description:

Annual Filing of Premium Rates and Loss Ratio Projections for Standardized Medicare Supplement Policy Plans A, B, C, F, G and J, and Proposed Rate Increase Filing for Plans B, C, F and G.

This filing is a combination of our annual filing of premium rates and loss ratio projections and our proposed rate revision for 2011. It has been organized into two separate sections.

The first section of this filing meets the reporting requirements as set forth under Section 13 C of the NAIC model

SERFF Tracking Number: *PHYS-128214198* State: *Arkansas*
Filing Company: *Physicians Mutual Insurance Company* State Tracking Number:
Company Tracking Number:
TOI: *MS051 Individual Medicare Supplement - Standard Plans* Sub-TOI: *MS051.015 Multi-Plan*
Product Name: *2012 Standard Mutual Medicare Supplement Rate Increase Filing*
Project Name/Number: */*

regulation. In addition, it shows that we meet, or can reasonably expect to meet, all of the mandated loss ratio standards. Our reporting format closely follows the order of presentation in Section III of the NAIC compliance manual.

The second section of this filing explains our need for a rate increase. It follows the order of presentation in Sections III and IV of the NAIC compliance manual.

We look forward to your approval of this filing. If you have any questions or need any additional information, please contact me at (402) 633-5782, at fax (402) 633-1096 or at e-mail address richie.hinman@physiciansmutual.com.

State Narrative:

Company and Contact

Filing Contact Information

Debbie Thielen, Re-Rating Analyst *debbie.thielen@physiciansmutual.com*
2600 Dodge Street *402-930-2434 [Phone]*
Omaha, NE 68131 *402-633-1096 [FAX]*

Filing Company Information

Physicians Mutual Insurance Company	CoCode: 80578	State of Domicile: Nebraska
2600 Dodge Street	Group Code: 367	Company Type:
Omaha, NE 68131	Group Name:	State ID Number:
(402) 633-1188 ext. [Phone]	FEIN Number: 47-0270450	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$300.00
Retaliatory?	No
Fee Explanation:	\$50.00 Plan A
	\$50.00 Plan B
	\$50.00 Plan C
	\$50.00 Plan F
	\$50.00 Plan G
	\$50.00 Plan J
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Physicians Mutual Insurance Company	\$300.00	03/30/2012	57599485

SERFF Tracking Number: PHYS-128214198 State: Arkansas

Filing Company: Physicians Mutual Insurance Company State Tracking Number:

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.015 Multi-Plan
Standard Plans

Product Name: 2012 Standard Mutual Medicare Supplement Rate Increase Filing

Project Name/Number: /

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	04/24/2012	04/24/2012
Disapproved	Stephanie Fowler	04/03/2012	04/03/2012

Objection Letters and Response Letters

Objection Letters				Response Letters		
Status	Created By	Created On	Date Submitted	Responded By	Created On	Date Submitted
Pending Industry Response	Stephanie Fowler	04/23/2012	04/23/2012	Debbie Thielen	04/24/2012	04/24/2012

SERFF Tracking Number: *PHYS-128214198* State: *Arkansas*
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Company Tracking Number:
TOI: *MS051 Individual Medicare Supplement - Standard Plans* Sub-TOI: *MS051.015 Multi-Plan*
Product Name: *2012 Standard Mutual Medicare Supplement Rate Increase Filing*
Project Name/Number: */*

Disposition

Disposition Date: 04/24/2012

Implementation Date: 06/01/2012

Status: Approved-Closed

Comment: The negotiated rate increase of 2% has been approved to be implemented on or after June 1, 2012 for Plans B, C, F and G. No rate revision was requested, nor approved for Plans A and J. This filing will serve as the annual rate certificaiton for these two plans.

This approval is subject to the following:

- Increases will not be given more frequently than once in a twelve-month period;
- The insured shall be notified by the insurer of its intention to increase the rate for renewal not less than thirty (30) days prior to the effective date of the renewal.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Physicians Mutual Insurance Company	4.900%	4.900%	\$36,623	185	\$750,634	5.000%	0.000%

SERFF Tracking Number: *PHYS-128214198* State: *Arkansas*

Filing Company: *Physicians Mutual Insurance Company* State Tracking Number:

Company Tracking Number:

TOI: *MS051 Individual Medicare Supplement - Standard Plans* Sub-TOI: *MS051.015 Multi-Plan*

Product Name: *2012 Standard Mutual Medicare Supplement Rate Increase Filing*

Project Name/Number: */*

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Rate	Standard Med Supp Plans A, J	Approved-Closed	Yes
Rate (revised)	Standard Med Supp Plans B, C, F, G	Approved-Closed	Yes
Rate	Standard Med Supp Plans B, C, F, G	Disapproved	No

SERFF Tracking Number: *PHYS-128214198* State: *Arkansas*
 Filing Company: *Physicians Mutual Insurance Company* State Tracking Number:
 Company Tracking Number:
 TOI: *MS051 Individual Medicare Supplement - Standard Plans* Sub-TOI: *MS051.015 Multi-Plan*
 Product Name: *2012 Standard Mutual Medicare Supplement Rate Increase Filing*
 Project Name/Number: */*

Disposition

Disposition Date: 04/03/2012

Implementation Date:

Status: Disapproved

Comment: Given the lack of credibility on this block of business we cannot approve this rate increase at this time. However, we are approving the annual rate certification portion of this filing.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Physicians Mutual Insurance Company	4.900%	4.900%	\$36,623	185	\$750,634	5.000%	0.000%

SERFF Tracking Number: *PHYS-128214198* State: *Arkansas*

Filing Company: *Physicians Mutual Insurance Company* State Tracking Number:

Company Tracking Number:

TOI: *MS051 Individual Medicare Supplement - Standard Plans* Sub-TOI: *MS051.015 Multi-Plan*

Product Name: *2012 Standard Mutual Medicare Supplement Rate Increase Filing*

Project Name/Number: */*

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Health - Actuarial Justification	Approved-Closed	No
Rate	Standard Med Supp Plans A, J	Approved-Closed	Yes
Rate (revised)	Standard Med Supp Plans B, C, F, G	Approved-Closed	Yes
Rate	Standard Med Supp Plans B, C, F, G	Disapproved	No

SERFF Tracking Number: PHYS-128214198 State: Arkansas
Filing Company: Physicians Mutual Insurance Company State Tracking Number:
Company Tracking Number:
TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.015 Multi-Plan
Standard Plans
Product Name: 2012 Standard Mutual Medicare Supplement Rate Increase Filing
Project Name/Number: /

Objection Letter

Objection Letter Status Pending Industry Response
Objection Letter Date 04/23/2012
Submitted Date 04/23/2012
Respond By Date 05/23/2012

Dear Debbie Thielen,

After further review of this request, we would be willing to approve a 2% rate increase on this block of business; this offer is made in lieu of disapproval.

A.C.A. 23-79-109(1)-(5) sets forth the procedure by which filings may be deemed approved upon the expiration of certain time periods with no affirmative action by the commissioner. If the commissioner determines that additional information is needed to make a decision regarding approval, such request for information will be made to the company. The filing will not be considered complete until said additional information is received. The time periods set forth in this statute will not begin to run until the filing is complete.

Please feel free to contact me if you have questions.

Sincerely,
Stephanie Fowler

SERFF Tracking Number: PHYS-128214198 State: Arkansas
 Filing Company: Physicians Mutual Insurance Company State Tracking Number:
 Company Tracking Number:
 TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.015 Multi-Plan
 Standard Plans
 Product Name: 2012 Standard Mutual Medicare Supplement Rate Increase Filing
 Project Name/Number: /

Response Letter

Response Letter Status Submitted to State
 Response Letter Date 04/24/2012
 Submitted Date 04/24/2012

Dear Stephanie Fowler,

Comments:

Response 1

Comments: We accept your offer of a 2% rate increase on old Standard Plans B, C, F and G. The revised rate pages are attached for your review.

Changed Items:

No Supporting Documents changed.

No Form Schedule items changed.

Rate/Rule Schedule Item Changes

Document Name:	Affected Form Numbers:	Rate Action:	Rate Action Information:	Attach Document:
Standard Med Supp Plans B, C, F, G	P621,P622,P625,P626	Revised	Previous State Filing Number 47526 Percent Rate Change Request 2	AG_Banded_Areas.pdf DR_Banded_Areas.pdf Mutual AREA-STD- 071205.pdf AR_2012_Rates_BCFG _2%.pdf
Previous Version				
Standard Med Supp Plans B, C, F, G	P621,P622,P625,P626	Revised	Previous State Filing Number	AR_2012_Rates_BCFG. pdf AG_Banded_Areas.pdf

DR_Banded_Areas.pdf
Mutual AREA-STD-
071205.pdf

Percent Rate Change Request

Sincerely,
Debbie Thielen, Richie Hinman

SERFF Tracking Number: *PHYS-128214198* State: *Arkansas*
Filing Company: *Physicians Mutual Insurance Company* State Tracking Number:
Company Tracking Number:
TOI: *MS051 Individual Medicare Supplement - Standard Plans* Sub-TOI: *MS051.015 Multi-Plan*
Product Name: *2012 Standard Mutual Medicare Supplement Rate Increase Filing*
Project Name/Number: */*

Rate Information

Rate data applies to filing.

Filing Method: SERFF
Rate Change Type: Increase
Overall Percentage of Last Rate Revision: 4.500%
Effective Date of Last Rate Revision: 04/01/2011
Filing Method of Last Filing: SERFF

Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Physicians Mutual Insurance Company	4.900%	4.900%	\$36,623	185	\$750,634	5.000%	0.000%

SERFF Tracking Number: PHYS-128214198 State: Arkansas

Filing Company: Physicians Mutual Insurance Company State Tracking Number:

Company Tracking Number:

TOI: MS051 Individual Medicare Supplement - Sub-TOI: MS051.015 Multi-Plan
Standard Plans

Product Name: 2012 Standard Mutual Medicare Supplement Rate Increase Filing

Project Name/Number: /

Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:		Attachments
Approved-Closed 04/24/2012	Standard Med Supp Plans A, J	P620, P629	Other	Previous State Filing Number: Rate Action Other Explanation:	47526 Annual Filing Only	AR_2012_Rates_AJ.pdf
Approved-Closed 04/24/2012	Standard Med Supp Plans B, C, F, G	P621, P622, P625, P626	Revised	Previous State Filing Number: Percent Rate Change Request:	47526 2.000	AG_Banded_Areas.pdf DR_Banded_Areas.pdf Mutual AREA-STD-071205.pdf AR_2012_Rates_BCFG_2%.pdf

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P620
AGENCY SALES
PLAN A
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$160.57

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AG-STD-112993

ISSUES PRIOR TO JUNE 1, 1999

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P620A
AGENCY SALES
PLAN A
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$165.38

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES FROM JUNE 1, 1999 TO MAY 31, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P620A
AGENCY SALES
PLAN A
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$152.53

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES ON OR AFTER JUNE 1, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P620
DIRECT RESPONSE SALES
PLAN A
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$159.24

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
DR-STD-070193

ISSUES PRIOR TO JUNE 1, 1999

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P620A
DIRECT RESPONSE SALES
PLAN A
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$164.02

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES FROM JUNE 1, 1999 TO MAY 31, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P620A
DIRECT RESPONSE SALES
PLAN A
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$151.29

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES ON OR AFTER JUNE 1, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P629
AGENCY SALES
PLAN J
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$795.77

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AG-STD-112993

PHYSICIANS MUTUAL INSURANCE COMPANY

Omaha, Nebraska

MEDICARE SUPPLEMENT AREA RATING ZIP CODES

Agent-Sold Business

Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8
044-059	030-043	029	010-016	017-019	020-022	100-102	330-333
290-293	120-121	061-067	023-028	070-073	103-104	190-191	900-918
295-299	123-124	122	060	080-081	111-114	334	926-928
353-354	128-145	146	068-069	106-108	116	349	
362-364	147-149	153-175	074-079	110	200-205	482	
367-369	176	177-179	082-099	115	322	485	
386-394	224-229	182-183	105	117-119	335-336	941	
396-399	238-289	188	109	150-152	339		
406-422	294	195-197	125-127	186-187	347-348		
425-429	304-307	199	180-181	189	920-925		
504-505	312	230-237	184-185	192-194	930-931		
507-509	315-319	300-303	198	222-223	933		
511-519	356-361	308-311	206-221	320-321	940		
521-534	365-366	313-314	325-326	327-329	942-946		
539-549	373-385	323-324	338	337			
555-579	400-405	350-352	480-481	340-346			
682-699	423-424	355	484	602-603			
732-739	433-441	370-372	486	606			
742-749	444-445	395	600-601	890			
	447-449	430-432	604-605	894-895			
	454-461	442-443	700-701	934			
	465-479	446	704	947-951			
	493-495	450-453	707-708				
	500-503	462-464	850-853				
	506	483	891-893				
	510	487-492	896-899				
	520	496-499	919				
	535-538	550-554	929				
	580-589	590-591	932				
	592-593	594	935-939				
	595-599	609-619	952-966				
	607-608	625-626	995-999				
	620-624	630-631					
	627-629	633					
	632	640-641					
	634-639	729					
	642-679	750-799					
	680-681	846					
	702, 703	854-869					
	705-706	875					
	709-728	974					
	730-731	980-994					
	740-741						
	800-845						
	847-849						
	870-874						
	876-889						
	967-973						
	975-979						

Area Factors

Plan	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6	Area 7	Area 8
A	0.95	1.00	1.10	1.19	1.29	1.38	1.53	1.72
B	0.98	1.00	1.04	1.09	1.13	1.17	1.24	1.33
C	0.98	1.00	1.04	1.09	1.13	1.17	1.24	1.33
E	0.98	1.00	1.04	1.09	1.13	1.17	1.24	1.33
F	0.97	1.00	1.06	1.12	1.18	1.24	1.33	1.46
J	0.98	1.00	1.04	1.09	1.13	1.17	1.24	1.33

PHYSICIANS MUTUAL INSURANCE COMPANY

Omaha, Nebraska

MEDICARE SUPPLEMENT POLICY

AREA RATING STATES

Direct Response Business

Area 1	Area 2	Area 3	Area 4	Area 5	Area 6
VT	UT	VA	AZ	NV	DC
SD	NM	WA	LA	NJ	CA
SC	AR	TX	PA	MD	
WI	AL	KS	NY	MA	
NE	WV	MI	AK	FL	
MS	TN	IL			
ME	OK	CT			
KY	IN	DE			
IA	OH	RI			
WY	MT				
OR	MO				
NH	GA				
ND	CO				
NC					
ID					
MN					
HI					

Plan	Area 1	Area 2	Area 3	Area 4	Area 5	Area 6
A	0.95	1.01	1.07	1.15	1.24	1.38
B	0.97	1.01	1.04	1.10	1.15	1.24
C	0.98	1.00	1.03	1.07	1.11	1.17
E	0.98	1.00	1.03	1.07	1.11	1.17
F	0.97	1.01	1.04	1.10	1.15	1.24

DR-STD-070193

Omaha, Nebraska

Agent and Direct Response Solicited Business

AREA RATING ZIP CODES
ISSUES AFTER APRIL 1, 2002

[illegible]

*Issues on or after September 1, 2002 for certain Illinois zip codes only.
 **Issues on or after April 1, 2003 for certain Ohio zip codes only.
 ***Issues on or after April 1, 2003 for certain Utah zip codes only.
 ****Issues on or after April 1, 2000 for certain Wisconsin zip codes only.

AREA-STD-071205

CURRENT RATE SCHEDULES

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P621A
AGENCY SALES
PLAN B
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$204.90

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES FROM JUNE 1, 1999 TO MAY 31, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P621A
AGENCY SALES
PLAN B
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$187.61

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES ON OR AFTER JUNE 1, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P621
DIRECT RESPONSE SALES
PLAN B
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$214.91

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
DR-STD-070193

ISSUES PRIOR TO JUNE 1, 1999

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P621A
DIRECT RESPONSE SALES
PLAN B
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$221.31

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES FROM JUNE 1, 1999 TO MAY 31, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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FORM P621A
DIRECT RESPONSE SALES
PLAN B
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$202.61

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

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PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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FORM P622
AGENCY SALES
PLAN C
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$331.15

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AG-STD-112993

ISSUES PRIOR TO JUNE 1, 1999

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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MEDICARE SUPPLEMENT POLICY

FORM P622A
AGENCY SALES
PLAN C
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$341.08

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES FROM JUNE 1, 1999 TO MAY 31, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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FORM P622A
AGENCY SALES
PLAN C
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$312.49

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES ON OR AFTER JUNE 1, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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FORM P622
DIRECT RESPONSE SALES
PLAN C
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$320.51

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
DR-STD-070193

ISSUES PRIOR TO JUNE 1, 1999

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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FORM P622A
DIRECT RESPONSE SALES
PLAN C
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$330.06

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

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PHYSICIANS MUTUAL INSURANCE COMPANY
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FORM P622A
DIRECT RESPONSE SALES
PLAN C
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$302.44

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
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2600 DODGE STREET
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FORM P625
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PLAN F
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$294.35

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AG-STD-112993

ISSUES PRIOR TO JUNE 1, 1999

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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FORM P625A
AGENCY SALES
PLAN F
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$303.57

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES FROM JUNE 1, 1999 TO MAY 31, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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MEDICARE SUPPLEMENT POLICY

FORM P625A
AGENCY SALES
PLAN F
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$277.33

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES ON OR AFTER JUNE 1, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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DIRECT RESPONSE SALES
PLAN F
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$277.00

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
DR-STD-070193

ISSUES PRIOR TO JUNE 1, 1999

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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MEDICARE SUPPLEMENT POLICY

FORM P625A
DIRECT RESPONSE SALES
PLAN F
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$286.71

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QRTLRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES FROM JUNE 1, 1999 TO MAY 31, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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MEDICARE SUPPLEMENT POLICY

FORM P625A
DIRECT RESPONSE SALES
PLAN F
ARKANSAS

<u>AGE</u>	<u>2011 MONTHLY BASE PREMIUM</u>
00-99	\$261.90

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES ON OR AFTER JUNE 1, 2000

PHYSICIANS MUTUAL INSURANCE COMPANY
Table of Rates
Medicare Supplement Policy

Plan G
Arkansas
2011

Automatic Bank Withdrawal
Base Premiums

ISSUES ON OR AFTER Apr 1, 2003

Age	Agency Issue Age
65-99	\$212.80

Please refer to
AREA -STD-
071205 for areas
and factors.

To obtain Monthly rates, add \$5 to the above quoted Automatic Bank Withdrawal rates. To obtain Quarterly, Semi-Annual, and Annual rates, multiply the above quoted Automatic Bank Withdrawal by 3, 6 and 12 respectively.

PROPOSED RATE SCHEDULES

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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MEDICARE SUPPLEMENT POLICY

FORM P621A
AGENCY SALES
PLAN B
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$209.00

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRTRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES FROM JUNE 1,1999 TO MAY 31, 2000

P621A-AG-AR-042412

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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MEDICARE SUPPLEMENT POLICY

FORM P621A
AGENCY SALES
PLAN B
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$191.36

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES ON OR AFTER JUNE 1, 2000

P621A-AG-AX-042412

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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MEDICARE SUPPLEMENT POLICY

FORM P621
DIRECT RESPONSE SALES
PLAN B
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$219.21

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
DR-STD-070193

ISSUES PRIOR TO JUNE 1, 1999

P621-DR-AR-042412

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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MEDICARE SUPPLEMENT POLICY

FORM P621A
DIRECT RESPONSE SALES
PLAN B
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$225.74

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRTRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES FROM JUNE 1,1999 TO MAY 31, 2000

P621A-DR-AR-042412

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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FORM P621A
DIRECT RESPONSE SALES
PLAN B
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$206.66

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRTRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES ON OR AFTER JUNE 1, 2000

P621A-DR-AX-042412

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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MEDICARE SUPPLEMENT POLICY

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AGENCY SALES
PLAN C
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$337.77

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AG-STD-112993

ISSUES PRIOR TO JUNE 1, 1999

P622-AG-AR-042412

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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FORM P622A
AGENCY SALES
PLAN C
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$347.90

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES FROM JUNE 1,1999 TO MAY 31, 2000

P622A-AG-AR-042412

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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FORM P622A
AGENCY SALES
PLAN C
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$318.74

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRTRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES ON OR AFTER JUNE 1, 2000

P622A-AG-AX-042412

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
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FORM P622
DIRECT RESPONSE SALES
PLAN C
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$326.92

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
DR-STD-070193

ISSUES PRIOR TO JUNE 1, 1999

P622-DR-AR-042412

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FORM P622A
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PLAN C
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$336.66

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRTRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

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PLAN C
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$308.49

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRTRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES ON OR AFTER JUNE 1, 2000

P622A-DR-AX-042412

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FORM P625
AGENCY SALES
PLAN F
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$300.24

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AG-STD-112993

ISSUES PRIOR TO JUNE 31, 1999

P625-AG-AR-042412

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AGENCY SALES
PLAN F
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$309.64

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES FROM JUNE 1,1999 TO MAY 31, 2000

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FORM P625A
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PLAN F
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$282.88

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES ON OR AFTER JUNE 1, 2000

P625A-AG-AX-042412

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

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FORM P625
DIRECT RESPONSE SALES
PLAN F
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$282.54

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRLY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
DR-STD-070193

ISSUES PRIOR TO JUNE 1, 1999

P625-DR-AR-042412

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P625A
DIRECT RESPONSE SALES
PLAN F
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$292.44

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRTRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES FROM JUNE 1,1999 TO MAY 31, 2000

P625A-DR-AR-042412

PHYSICIANS MUTUAL INSURANCE COMPANY
2600 DODGE STREET
OMAHA, NEBRASKA 68131

TABLE OF RATES

MEDICARE SUPPLEMENT POLICY

FORM P625A
DIRECT RESPONSE SALES
PLAN F
ARKANSAS

<u>AGE</u>	<u>2012 ISSUE AGE MONTHLY BASE PREMIUM</u>
00-99	\$267.14

TO OBTAIN MONTHLY AUTOMATIC BANK WITHDRAWAL, QUARTERLY, SEMI-ANNUAL,
AND ANNUAL:MULTIPLY THE ABOVE QUOTED MONTHLY RATES BY THE FOLLOWING FACTORS
ABW: .950 QTRTRY: 2.900 SEMI-ANN: 5.600 ANNUAL: 11.000 .

IF THE SPOUSE IS COVERED BY THE SAME POLICY, THEN THE RATE
FOR THE SPOUSE WILL BE 90% OF THE ABOVE QUOTED MONTHLY RATES.

REFER TO THE FOLLOWING AREA RATING SCHEDULE FOR AREAS AND FACTORS:
AREA-STD-071205

ISSUES ON OR AFTER JUNE 1, 2000

P625A-DR-AX-042412

PHYSICIANS MUTUAL INSURANCE COMPANY
Table of Rates
Medicare Supplement Policy

Plan G
Arkansas
2012

Automatic Bank Withdrawal
Base Premiums

ISSUES ON OR AFTER Apr 1, 2003

Age	Agency Issue Age
65-99	\$217.05

Please refer to
AREA -STD-
071205 for areas
and factors.

To obtain Monthly rates, add \$5 to the above quoted Automatic Bank Withdrawal rates. To obtain Quarterly, Semi-Annual, and Annual rates, multiply the above quoted Automatic Bank Withdrawal by 3, 6 and 12 respectively.

SERFF Tracking Number: *PHYS-128214198* State: *Arkansas*
Filing Company: *Physicians Mutual Insurance Company* State Tracking Number:
Company Tracking Number:
TOI: *MS051 Individual Medicare Supplement - Standard Plans* Sub-TOI: *MS051.015 Multi-Plan*
Product Name: *2012 Standard Mutual Medicare Supplement Rate Increase Filing*
Project Name/Number: */*

Superseded Schedule Items

Please note that all items on the following pages are items, which have been replaced by a newer version. The newest version is located with the appropriate schedule on previous pages. These items are in date order with most recent first.

Creation Date:	Schedule	Schedule Item Name	Replacement Creation Date	Attached Document(s)
03/28/2012	Rate and Rule	Standard Med Supp Plans B, C, F, G	04/24/2012	AR_2012_Rates_BCFG.pdf (Superceded) AG_Banded_Areas.pdf DR_Banded_Areas.pdf Mutual AREA-STD-071205.pdf